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Certified Mail Fee \$ 7/28/16

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<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark Here

Postage: \$ Rey Ortiz #17246-180

Total P \$ FCI CUMBERLAND

Sent To \$ P.O. Box 1000

Street: Cumberland, MD 21501

City, St: 3:07-cr-1965-PRM-1 Doc. 83 sf

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions